



CITY OF COLORADO SPRINGS  
FIRE BOARD OF APPEALS MEETING AGENDA  
PIKES PEAK REGIONAL BUILDING DEPARTMENT  
2880 INTERNATIONAL CIRCLE  
OCTOBER 12, 2018 – 8:30 A.M. to 10:00 A.M.

**CALL TO ORDER**

**ADMINISTRATIVE**

**1. Review Previous Meeting's Minutes**

September 14, 2018's Fire Board of Appeals Meeting Minutes

**2. Contractor Licensing**

**A. Fire Alarm Contractor (FAC) A**

- i. Business Name: ETG-Fire, LLC  
Principal Officers: Chris Vanderstokker, President  
Licensee: Michael McNierney  
RME: Michael McNierney
- ii. Business Name: Harbinger Fire and Security, LLC  
Principal Officers: George Horn, President/Owner  
Jerad Madeo, Owner  
Licensee: John Goins  
RME: John Goins

**B. Fire Suppression Contractor (FSC) B**

- i. Business Name: Fire Protection Concepts, Inc.  
Principal Officers: Mark Neal, President  
Jacqueline Neal, Vice President  
Licensee: Mark Neal  
RME: Mark Neal

**DISCUSSION ITEM**

**1. Follow Up To Proposed Changes to Colorado Springs, Colorado, City Code Section 8.3.101**

Presented by Fire Marshal Brett Lacey

**ADJOURN**

Respectfully submitted,

  
Brett T. Lacey, Fire Marshal  
Secretary to Fire Board of Appeals



## FIRE APPLICATION CONTRACTOR AND INSTALLER CHECK LIST

COMPANY NAME: ETG-FIRE, LLC

PRINCIPAL: CHRIS VANDERSTOKKER

LICENSE HOLDER: MICHAEL MCNIERNEY

RME: MICHAEL MCNIERNEY

RECOMMEND:

☒ APPROVAL

☐ DISAPPROVAL

DATE 9/24/18

LICENSE APPLYING FOR:

FSC-A    FSC-B    FSC-C    FSC-D    FSC-H    FSC-M    FAC-A    FAC-B  
FAI    FSI    FSI-L    FST-B    FST-C    FST-D    FHT

PPRBD INFORMATION	NAME	DATE
RECEIVED BY PPRBD	Sabrina	9/24/2018
CRIMINAL BACKGROUND CHECK	Sabrina	9/24/2018
SENT TO FIRE	Sabrina	9/24/2019

DEPARTMENT	NAME	DATE
<b>CSFD</b>	<b>Chip Taylor</b>	<b>9/24/18</b>

COMMENTS:

Additional license 21684

PPRBD LICENSING

Phone: 719-327-2887

Fax: 719-327-2626

Email: Licensing@pprbd.org

FIRE

Phone: 719-385-5982

Fax: 719-385-7330

Email: Fireconstructionservices@springsgov.com

#### **Fire Suppression Contractor – A**

- ☐ RME w/ Current NICET Level III or IV certificate in sprinkler layout/design or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Suppression Contractor – B**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable/fixed systems.
- ☐ D.O.T registration as approved cylinder requalification facility OR contract with an outside cylinder requalification facility (a copy of this contracted facility's certification of liability insurance equal to that of the licensee's shall be provided).
- ☐ Documentation showing the RME qualifications and at least 3 years applicable work experience
- ☐ Certification from at least one manufacturer of special hazard systems that the applicant markets.
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Fire Suppression Contractor/Dealer – C**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable fire extinguishers.
- ☐ D.O.T registration as approved cylinder requalification facility OR contract with an outside cylinder requalification facility (a copy of this contracted facility's certification of liability insurance equal to that of the licensee's shall be provided).
- ☐ Documentation showing the RME qualifications and at least 2 years applicable work experience
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Commercial, Industrial, or Institutional Non-Contractor/Dealer – D**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable fire extinguishers.
- ☐ Documentation showing the RME qualifications and at least 2 years applicable work experience
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Fire Suppression Contractor – M**

- ☐ RME w/ Current and Valid Colorado State Master Plumber's license w/ minimum 3 years' experience.
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Suppression Contractor – H**

- ☐ Letter of commitment stating minimum equipment requirements are met for servicing and maintaining hydrants.
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation showing the Responsible Managing Employee (RME) qualifications for service and repair of fire hydrants.

#### **Fire Alarm Contractors – A**

- ☒ RME w/ Current NICET Level III or IV certificate in Fire Alarm Systems or a Colorado Registered PE
- ☒ Certificate of Liability and Workers' Compensation insurance.
- ☒ Documentation of minimum 5 years work experience.

#### **Fire Alarm Contractors – B**

- ☐ RME w/ Current NICET Level II or higher in Fire Alarm Systems or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### Suppression Installer

- ☐ Satisfactory completion of the ASCR2 exam every 3 years.
- ☐ Minimum of 2 years work experience in fire sprinklers/standpipes.

#### Suppression Installer Limited

- ☐ Satisfactory completion of the ASD2 exam every 3 years.
- ☐ Minimum of two years' work experience in single-family multipurpose fire sprinkler systems.
- ☐ State of Colorado Plumber license

#### Service Technician - B

- ☐ Satisfactory completion of the FEX and CKH2 OR KHFE2 exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate)

#### Service Technician – C

- ☐ Satisfactory completion of the FEX exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate).

#### Service Technician - D

- ☐ Satisfactory completion of the FEX exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate).

#### Fire Hydrant Technician

- ☐ Satisfactory completion of the CTFH2 exam every 3 years.
- ☐ Minimum 2 years' experience.

#### Fire Alarm On-Site Installer

- ☐ Current and valid NICET Level II or higher certificate OR satisfactory completion of FA2 exam every 3 years
- ☐ Documentation of minimum 2 years' experience.

# PIKES PEAK REGIONAL BUILDING DEPARTMENT

## Fire Alarm Contractor License Application

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the state license in compliance with the Pikes Peak Regional Building Code.

FIRE ALARM CONTRACTOR LICENSE REQUESTED (Check one)

☒ FAC-A ☐ FAC-B

RBD USE ONLY

Date 9-24-2018

Initial SE

Receipt # 180598

RBD # 21684

### Business Information

Type of Entity (Check one) ☐ Individual ☐ Partnership ☐ Corporation ☒ LLC

Business Name: ETG-FIRE, LLC

(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate.)

Federal Employer Identification Number: 47-1808724

Business Address: 7700 E ILIFF AVE SUITE G

Street Address

DENVER

City

Apartment/Unit #

COLORADO

State

80231

ZIP Code

Business Phone: (720) 504-9700

Business Email: chris@etgfire.com

Business Fax: \_\_\_\_\_

Business Website: www.etgfire.com

Company's Principal Officers, Partners, or Owners

Name: Chris Vanderstokker

Title: Pres.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

1. Number of years company has operated as a contractor? (If new, write "new") 4

2. Type of work performed? (Check one or both, if applicable) ☐ Residential ☒ Commercial

3. Has the company ever been named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against them in which the company was the contractor? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

4. Has the company been a defendant in a collection action court case? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

5. Has the company ever declared bankruptcy? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

6. Has the company ever had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

7. Has the company ever defaulted on a contract? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

### Licenses held by the Company

Jurisdiction - License type and number

Jurisdiction- License type and number

PPRBD, BUILDING D-8B, FSC-B, ID#21684

Wyoming, Low Voltage Fire Alarm, LV-A-47476

City and County of Denver, Electrical Signal, LIC08

Aurora, CO: Fire Alarm License, 2018 1415739 00

City and County of Denver, Fire Suppression C, L#

State of Colorado, Fire Suppression, 18-S-01779

**Project History (List projects in which this company worked as the contractor.)**

1. Project Street Address: Verizon, 4323 Arrowswest Dr. Colorado Springs 80908

Type of work (check one) ☐ Residential ☒ Commercial

Cost: \$129,000 Date: 2017 Your position: Project Manager

Describe Job in detail: Addition of FM-200 and detection & controls.

2. Project Street Address: Tutt Library, 1021 N. Cascade Ave. Colorado Springs

Type of work (check one) ☐ Residential ☒ Commercial

Cost: \$74,000 Date: 2017 Your position: Project Manager

Describe Job in detail: Addition of FE-25 suppression agent.

3. Project Street Address: UCCS 1420 Austin Bluffs Parkway Colorado Springs

Type of work (check one) ☐ Residential ☒ Commercial

Cost: \$88,000 Date: 2018 Your position: Project Manager

Describe Job in detail: Addition of NOVEC-1230 fire suppression.

4. Project Street Address: Schriever Bldg. 720, Schriever AFB, Colorado Springs

Type of work (check one) ☐ Residential ☒ Commercial

Cost: \$140,000 Date: 2018 Your position: Project Manager

Describe Job in detail: Design and install VESDA smoke detection system.

5. Project Street Address: Fort Carson Bldg. 9635 Paint Booth

Type of work (check one) ☐ Residential ☒ Commercial

Cost: \$24,000 Date: 2018 Your position: Project Manager

Describe Job in detail: Design and install paint booth fire detection and suppression

**CERTIFICATION** (The following declaration is to be signed by the principal officer of the company) The undersigned, on behalf of the company, partnership or corporation, does hereby declare and warrant that the "examinee" for a contractor's license named herein has the express authority to bind the company, partnership, or corporation by this application; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the city of Colorado Springs, El Paso County, and those adopted by the municipal entities within El Paso County in regard to any work which may be performed by our company pursuant to the contractor license for which this application is made.

Print name and title (owner, principal or manager) Chris Vanderstokker

Signature: 

Date: 8/24/18



## Responsible Managing Employee (RME) Information

Legal Name: McNierney Michael  
Last First M.I.

Date of Birth: May 01, 1971 Social Security Number: [REDACTED]

Address: 6743 West Ida Place Unit 1036  
Street Address Apartment/Unit #  
Littleton Colorado 80123  
City State ZIP Code

Phone: (720) 504-9700 Fax: \_\_\_\_\_ Email: mike@etgfire.com

1. What is your area of expertise in the industry? Fire Alarm and Fire Suppression
2. How long have you worked in the industry? 17 Years
3. What is your affiliation with the company? (Owner, partner, employee, etc.) Vice President
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
6. I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. ☐ Yes ☐ No

### Certifications

NICET #	NICET Level	Expires
49976 (Fire Alarm)	III	6/01/21
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

### Work History

Company	Position	To	From
ETG-FIRE	Vice President	Current	01/01/2015
Westfire	Service Manager	12/31/2014	10/1/2001

**CERTIFICATION** (The following declaration is to be signed by the RME) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (RME): Michael McNierney, Vice President

Signature of (RME):  Date: 8/24/18

### Licensee Information

Legal Name: McNierney Michael  
Last First M.I.

Date of Birth: May 01, 1971 Social Security Number: [REDACTED]

Address: 7700 E. ILIFF AVE. SUITE G  
Street Address Apartment/Unit #

DENVER COLORADO 80231  
City State ZIP Code

Phone: (720) 504-700 Fax: \_\_\_\_\_ Email: mike@etgfire.com

1. What is your area of expertise in the industry? Fire alarm and fire suppression.
2. How long have you worked in the industry? 17 Years
3. What is your affiliation with the company? (Owner, partner, employee, etc.) Vice President
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
6. The examinee understands that direct supervision and control includes any one or a combination of the following activities: supervising, managing construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites. Will you, as the qualifying individual, perform one or more of these duties? ☐ Yes ☐ No

### Certifications

NICET #	NICET Level	Expires
49976 (Fire Alarm)	III	6/01/21
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

### Work History

Company	Position	To	From
ETG-FIRE	VICE PRESIDENT	CURRENT	01/01/2015
WESTFIRE	SERVICE MANAGER	12/31/2014	10/1/2001

**CERTIFICATION** (The following declaration is to be signed by the **Licensee**) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (Licensee): Michael McNierney

Signature of (Licensee):  Date: 8/24/18



COLORADO

DL



DRIVER LICENSE

1 MCNIERNEY  
2 MICHAEL PATRICK  
8 7310 WEST 52ND AVE. # A288  
ARVADA, CO 80002

3 DOB 05/01/1971  
4a Iss 03/23/2017

4d Customer Identifier 4b Exp  
[REDACTED] 05/01/2022

5 DD [REDACTED]  
Previous Type A

15 Sex M  
16 Hgt 5'-05"  
18 Eyes GRN  
17 Wgt 180 lb

19 Hair BLK  
N. P. MCNIERNEY 05/10/1971

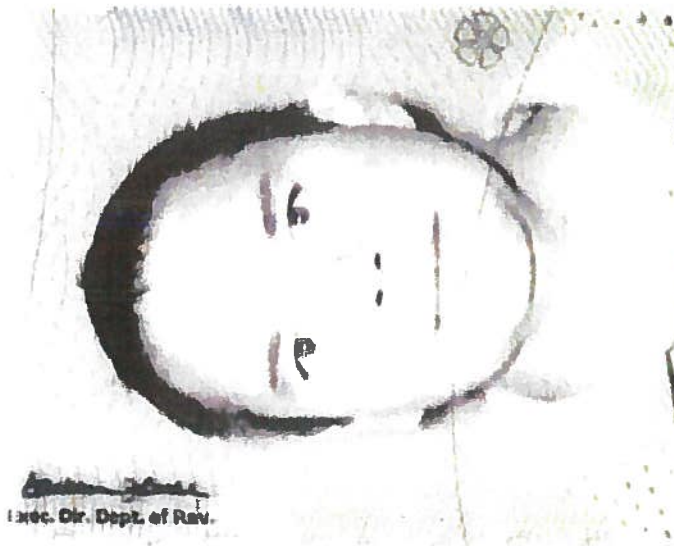
9a Endorsements

12 Restrictions

NONE

9 Vehicle Classifications

R



Sec. Dir. Dept. of Rev.

**PIKES PEAK REGIONAL BUILDING DEPARTMENT****Contractor -- ETG-FIRE, LLC ( 21684 )****Status: ACTIVE****Type of Business: Corporation****In Business Since: 30-Sep-2015**

7770 E LLIFF AVE #E

DENVER, CO 80231

Phone: (720) 504-9700

Fax:

Officer #1: MCNIERNEY,MIKE-MRG

**LICENSES**

Last Name	First Name	D	T	Cat	Subcat	Phone	Expires	Renewed
MCNIERNEY	MICHAEL	B	D	8B	FSC-B	(720) 504-9700	09/30/2018	10/19/2017

**OBLIGATIONS**

T	Agency	Reference #	Expires
C - Certification	D.O.T	RIN H852	03/06/2020
L - Liability	EVEREST INDEMNITY INSURANCE	51GL0079732181	01/01/2019
W - Workers Comp.	EVEREST NATIONAL INSURANCE	5300003671181	01/01/2019

City and County of Denver  
Community Planning and Development  
[www.denvergov.org/contractor\\_licensing](http://www.denvergov.org/contractor_licensing)

License/Registration Number: LIC245159  
Expiration Date: 03/31/2021  
License Type: Fire Pro C

**Issued To:**

By Authority of the Executive Director of  
Community Planning and Development

ETG-FIRE LLC  
7700 E ILIFF AVE UNIT G  
DENVER, CO 80231

Amount	Fund/Org/Revenue Code	Payment Date	Trans #	Status
\$250.00	R353900-*01010-0141200	03/13/2018	4160923	Paid

**RENEWAL INFORMATION**

Renewal notices will be e-mailed to e-mail address on file.  
Renewal information is available at [www.denvergov.org/Contractor\\_Licensing](http://www.denvergov.org/Contractor_Licensing).

**INSPECTION INFORMATION**

Inspection requests called in by 12:00 a.m. will usually be scheduled for the following working day.

Please provide the following information when you call for an inspection:


- ✓ Permit number
- ✓ Type of inspection and inspection code

Automated Inspection Request System: 720-865-2501

Inspections are performed Monday through Friday.

**Wallet Contractor ID Card: MUST BE KEPT IN YOUR POSSESSION AT ALL TIMES.**

Cut on outside of line, then fold in half

City and County of Denver		City and County of Denver	
IDENTIFICATION CARD		Community Planning and Development	
License/Registration No.:	LIC245159	201 W COLFAX AVE DEPT 205 DENVER, COLORADO 80202	
This is to certify that ETG-FIRE LLC has been issued a Fire Pro C license in the City and County of Denver, beginning on 13 March 2018 and ending on 31 Mar 2021, unless license is revoked.		 <b>DENVER</b> THE MILE HIGH CITY	
<u>By Authority of the Executive Director of Community Planning and Development</u>		Licenses & Certificates: 720.865.2770 Permit Counter: 720.865.2705 Inspection Administration: 720.865.2505 Automated Inspection Request: 720.865.2501	

City and County of Denver  
Community Planning and Development  
[www.denvergov.org/contractor\\_licensing](http://www.denvergov.org/contractor_licensing)

License/Registration Number: LIC00246826  
Expiration Date: 03/31/2020  
License Type: Electrical Signal

Issued To:

By Authority of the Executive Director of  
Community Planning and Development

ETG-FIRE LLC  
7700 E ILIFF AVE UNIT G  
DENVER, CO 80231

Amount	Fund/Org/Revenue Code	Payment Date	Trans #	Status
\$250.00	352800-01010-0141200-Z0000-Z0000	03/28/2017	3042137	Paid

#### RENEWAL INFORMATION

Renewal notices will be e-mailed to e-mail address on file.  
Renewal information is available at [www.denvergov.org/Contractor\\_Licensing](http://www.denvergov.org/Contractor_Licensing).

#### INSPECTION INFORMATION

Inspection requests called in by 12:00 a.m. will usually be scheduled for the following working day.

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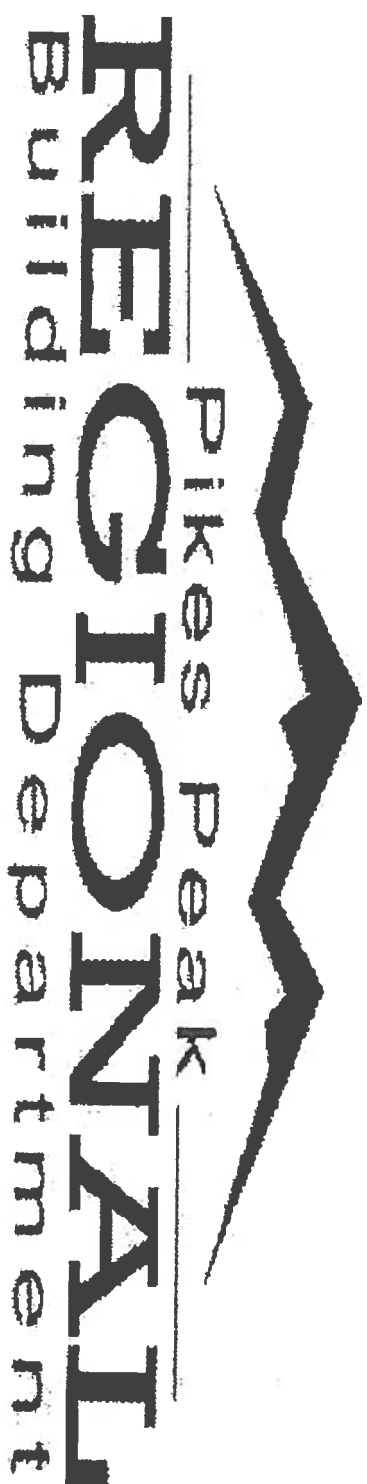
Wallet Contractor ID Card: MUST BE KEPT IN YOUR POSSESSION AT ALL TIMES

Cut on outside of line, then fold in half.

City and County of Denver <b>IDENTIFICATION CARD</b>	City and County of Denver Community Planning and Development 201 W. GOLFAX AVE DEPT 205 DENVER, COLORADO 80202
License/Registration No: LIC00246826	
This is to certify that ETG-FIRE LLC has been issued a Electrical Signal license in the City and County of Denver beginning on 28 March 2017 and ending on 31 Mar 2020, unless license is revoked	<b>DENVER</b> THE BIG BLUE CITY
By Authority of the Executive Director of Community Planning and Development	Licenses & Certificates: 720.865.2770 Permit Counter: 720.865.2705 Inspection Administration: 720.865.2505 Automated Inspection Request: 720.865.2501

LIC. 100(4/100) CPDA

LIC. 100 (4/100) CPDA - 2/27/15



THIS IS TO CERTIFY THAT  
ETG-FIRE, LLC

IS A LICENSED (ID# 21684)  
BUILDING D-8B (FSC-B)

Examinee: MICHAEL M ERNEY  
Expires: 30-Sep-2018

STATE OF COLORADO  
Division of Fire Prevention and Control



18-S-01779

*Be It Known That*  
ETG-FIRE, LLC

Chris Vanderstokker-RME

*Has Successfully Completed All Requirements  
to Become Registered*

Fire Suppression Systems Contractor

*Issued On*

January 1, 2018

*Expiring On, Unless Earlier Revoked*

December 31, 2018

*In Accordance With*

8 CCR 1507-11

Fire & Life Safety Section  
Division of Fire Prevention & Control  
700 Kipling Street, Suite 4100  
Denver, CO 80215

Mike Morgan, Director





This is to Certify that

**ETG-Fire LLC**

is registered with the Wyoming Department of Fire  
Prevention and Electrical Safety  
and is hereby permitted to work as a

**Low Volt Contractor Alarms**

Issue Date: 7/6/2018  
Expires: 7/1/2019

License # LV-A-47476  
Issued by: Joyce Knapp

This is to Certify that

**ETG-Fire LLC**

is registered with the Wyoming Department of Fire  
Prevention and Electrical Safety  
and is hereby permitted to work as a

**Low Volt Contractor Alarms**

Issue Date: 7/6/2018  
Expires: 7/1/2019

License # LV-A-47476  
Issued by: Joyce Knapp



**Public Works  
Building Division  
15151 E. Alameda Pky  
Aurora, CO 80012  
303-739-7420**

1266671

## CONTRACTOR LICENSE

**Date of Issue:** 02/14/2018

**Date of Expiration:** 03/01/2019

**License Number:** 2018 1415739 00 CL

**Contractor Name:** ETG FIRE LLC

**Type of License:** Fire Alarm Systems Contractor

*Permits Online User*

**LICENSING OFFICIAL**

It is the licensee's responsibility to be familiar with the City of Aurora Building Codes Division **Chapter 22 Building and Building Regulations, Article III Contractors Division 22-61 through 22-102** for contractor and supervisor licensee responsibilities.

ETG FIRE LLC  
7700 E ILIFF AVE UNIT G  
DENVER CO 80231

**Cut along perforated line**

Wallet

Duplicate



Public Works Building Division  
15151 E. Alameda Parkway  
AURORA, CO 80012  
PHONE NO. (303) 739-7420



Public Works Building Division  
15151 E. Alameda Parkway  
AURORA, CO 80012  
PHONE NO. (303) 739-7420

Valid through: 03/01/2019

Valid through: 03/01/2019

Contractor: ETG FIRE LLC

Contractor: ETG FIRE LLC

Type of License: Fire Alarm Systems Contractor

Type of License: Fire Alarm Systems Contractor

License #: 2018 1415739 00 CL

License #: 2018 1415739 00 CL

A signed license by license official should be  
maintained in your files.

A signed license by license official should be  
maintained in your files.

# Michael McNierney

ETG-Fire, LLC  
7770 E Iliff Avenue #E  
Denver, Colorado, 80231  
720-504-9700  
mike@etgfire.com

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## WORK EXPERIENCE

### ETG FIRE, Denver, CO

Service Manager, Nov 2014 – present

- Track and schedule preventative maintenance. Inspection includes monthly, quarterly, semi-annual and annual maintenance per NFPA and manufacture recommendations.
- Perform repairs on fire alarm, fire suppression and Industrial mining systems. Repairs include programming, device and panel replacement, electrical and mechanical troubleshooting.
- Perform recharge on existing systems that have discharged. Manage and maintain multitude of suppression gases to recharge existing suppression systems after they have been discharged.
- Service manager directly responsible for profit and loss of department. Schedule inspection and repairs on fire alarm, fire suppression, sprinkler and industrial mining equipment.
- Design and installation of mobile mining equipment with clean agent and wet/dry suppression systems. Fabricate/weld new systems on Haul trucks, Shovels, Drills, Power stations, Loaders, among other types of equipment on both surface and underground mining equipment.

### WESTFIRE, Arvada, CO

Service Manager, Oct 2001 – Nov 2014

- Responsible for running all aspects of large service department. Performed technical and managerial duties to include all items at current position.

## EDUCATION

### Industry Certifications,

- Fike Cheetah Detection & Control Course & Certification
- Fike SHP Detection & Control Course & Certification
- Fike Cheetah Xi Detection & Control Course & Certification
- Fire Control Instruments – 7100 Detection & Control Course & Certification
- FenwalNET 2000 Detection & Control Course & Certification
- VESDA Air Sampling – Detection Layout Course & Certification
- Ansul Checkfire Series Detection & Control Systems Training
- Ansul Redline Fire Training

## CREDENTIALS AND LICENSES

- NICET Level I: Inspection & Testing of Water-Based Systems
- NICET Level II: Fire Alarm Systems
- NICET Level III: Special Hazards Suppression Systems
- Colorado Springs Fire Suppression Contractor B License



August 24, 2018

Pikes Peak Regional Building Department  
2880 International Circle  
Colorado Springs, CO 80910  
(719) 327-2887

RE: Verification of Employment

Dear PPRBD

Please accept this letter as verification of employment for Mr. Michael McNierney. He is currently employed with ETG-FIRE as an officer of the company and performs various fire alarm and special hazard fire system duties including project management, test & maintenance, installation, and repair. Mike has been an employee of ETG-FIRE from January 2015 to present.

Should you have any further questions please do not hesitate to contact us at your convenience.

Sincerely,

Chris Vanderstokker

**ETGFIRE**  
SPECIAL HAZARDS FIRE PROTECTION  
7700 E Iliff Avenue, #G  
Denver, Colorado 80231  
(O) (720) 504-9700  
[chris@etgfire.com](mailto:chris@etgfire.com)  
[www.etgfire.com](http://www.etgfire.com)



Policy Number:

Date Entered 12/27/2017

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

1/8/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Architects Inc 1602 S. Parker Rd., Ste 208 Denver, CO 80231	CONTACT NAME: Matthew Burns	
	PHONE (A/C No. Ext): (303) 755-2148 FAX (A/C No.): (303) 755-2149	
	E-MAIL ADDRESS: matt_burns@qwestoffice.net	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED ETC-Fire, LLC  7700 E. Iliff Ave., #G Denver, CO 80231	INSURER A: Everest Indemnity Insurance Company	10851
	INSURER B: Hartford Accident & Indemnity Co.	22357
	INSURER C: Everest National Insurance Company	10120
	INSURER D:	
	INSURER E:	
	INSURER F:	

**COVERAGES**

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADOL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER, Deductible 1,000			51GL007973-181	1/1/2018	1/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OF AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> B <input checked="" type="checkbox"/> HIRED Auto <input checked="" type="checkbox"/> Non-Owned			34 UEC ZG 4246 DX	1/1/2018	1/1/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			51CC003014-181	1/1/2018	1/1/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	5300003671-181	1/1/2018	1/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Employer Lia. WA			5300003671-181	01/01/2018	01/01/2019	1,000,000
A	Errors & Omissions			51GL007973-181	01/01/2018	01/01/2019	Occurrence Included
A	Pollution			51GL007973-181	01/01/2018	01/01/2019	Aggregate 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

Pikes Peak Regional Building Department 2880 International Circle Colorado Springs, CO 80910	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  Matthew Burns

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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF FACT OF GOOD STANDING**

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

ETG-Fire, LLC

is a

Limited Liability Company

formed or registered on 09/09/2014 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20141551047 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/23/2018 that have been posted, and by documents delivered to this office electronically through 08/24/2018 @ 14:59:03 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/24/2018 @ 14:59:03 in accordance with applicable law. This certificate is assigned Confirmation Number 11082823 .



A handwritten signature in cursive script, reading "Wayne W. Williams".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



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Engineering Technologies



A division of the  
National Society for Professional Engineers

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### Certification Status

Mr. Michael P. McNierney

Field/ Subfield	Subfield	Grade	Expire Date	Status	Balance Due
00304	Inspection & Testing of Water-Based Systems	II		Pending	\$0.00
00305	Special Hazards Suppression Systems	IV		Pending	\$0.00
00303	Fire Alarm Systems	III	06/01/2021	Active	\$0.00
00304	Inspection & Testing of Water-Based Systems	I	06/01/2021	Active	\$0.00
00305	Special Hazards Suppression Systems	III	06/01/2021	Active	\$0.00

[Show All](#)

**Pending:** A "Pending" status means that not all certification requirements have been met. Certification requirements for each level of certification include:

- Testing and meeting the examination requirements.
- Submittal of application for evaluation of experience and substantiating documentation - and meeting the requisite experience requirements.
- Full payment of associated fees.
- Maintaining an "Active" status for lower level certification(s) - if any - in the same subfield.

Action could be required by the applicant or NICET. If you have any questions concerning your status, please contact NICET Customer Service at 1-888-476-4238.

← NICET III  
Fire  
Alarm



**PIKES PEAK REGIONAL BUILDING DEPARTMENT**

2880 International Circle  
Colorado Springs, Colorado 80910  
Website: <http://www.pprbd.org>

9/24/2018 3:15:48 PM  
(SABRINA)  
Receipt #: 1540598

**Invoice**

Contractor: ETG-FIRE, LLC (21684)

**Transaction Summary**

Account	Description	Reference	Amount
1301-40036	CONTRACTOR FEES APPLICATION	app fee	\$50.00
1301-40112	CONVENIENCE FEE WESTERN UNION SPEEDPAY (TELEPHONE)	FEE	\$3.50

Total Due: \$53.50

**Payment Summary**

Account	Description	Reference	Amount
9801-55700	COLLECTION, VISA/Master-Card	647364	\$53.50

Total Tendered: \$53.50

Comment: FAC-A APP FEE

I agree to pay above total amount according to card issuer agreement.



## FIRE APPLICATION CONTRACTOR AND INSTALLER CHECK LIST

COMPANY NAME: HARBINGER FIRE AND SECURITY LLC

PRINCIPAL: GEORGE HORN

LICENSE HOLDER: JOHN GOINS

RME: JOHN GOINS

RECOMMEND:

☒ APPROVAL

☐ DISAPPROVAL

DATE 9/18/18

LICENSE APPLYING FOR:

FSC-A    FSC-B    FSC-C    FSC-D    FSC-H    FSC-M    FAC-A    FAC-B  
FAI    FSI    FSI-L    FST-B    FST-C    FST-D    FHT

PPRBD INFORMATION	NAME	DATE
RECEIVED BY PPRBD	SABRINA	9/04/2018
CRIMINAL BACKGROUND CHECK	SABRINA	9/04/2018
SENT TO FIRE	SABRINA	9/04/2018

DEPARTMENT	NAME	DATE
<b>CSFD</b>	<b>Chip Taylor</b>	<b>9/18/18</b>

COMMENTS:

NEW

### PPRBD LICENSING

Phone: 719-327-2887

Fax: 719-327-2626

Email: [Licensing@pprbd.org](mailto:Licensing@pprbd.org)

### FIRE

Phone: 719-385-5982

Fax: 719-385-7330

Email: [Fireconstructionservices@springsgov.com](mailto:Fireconstructionservices@springsgov.com)

#### **Fire Suppression Contractor – A**

- ☐ RME w/ Current NICET Level III or IV certificate in sprinkler layout/design or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Suppression Contractor – B**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable/fixed systems.
- ☐ D.O.T registration as approved cylinder requalification facility OR contract with an outside cylinder requalification facility (a copy of this contracted facility's certification of liability insurance equal to that of the licensee's shall be provided).
- ☐ Documentation showing the RME qualifications and at least 3 years applicable work experience
- ☐ Certification from at least one manufacturer of special hazard systems that the applicant markets.
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Fire Suppression Contractor/Dealer – C**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable fire extinguishers.
- ☐ D.O.T registration as approved cylinder requalification facility OR contract with an outside cylinder requalification facility (a copy of this contracted facility's certification of liability insurance equal to that of the licensee's shall be provided).
- ☐ Documentation showing the RME qualifications and at least 2 years applicable work experience
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Commercial, Industrial, or Institutional Non-Contractor/Dealer – D**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable fire extinguishers.
- ☐ Documentation showing the RME qualifications and at least 2 years applicable work experience
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Fire Suppression Contractor – M**

- ☐ RME w/ Current and Valid Colorado State Master Plumber's license w/ minimum 3 years' experience.
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Suppression Contractor – H**

- ☐ Letter of commitment stating minimum equipment requirements are met for servicing and maintaining hydrants.
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation showing the Responsible Managing Employee (RME) qualifications for service and repair of fire hydrants.

#### **Fire Alarm Contractors – A**

- ☒ RME w/ Current NICET Level III or IV certificate in Fire Alarm Systems or a Colorado Registered PE
- ☒ Certificate of Liability and Workers' Compensation insurance.
- ☒ Documentation of minimum 5 years work experience.

#### **Fire Alarm Contractors – B**

- ☐ RME w/ Current NICET Level II or higher in Fire Alarm Systems or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### Suppression Installer

- ☐ Satisfactory completion of the ASCR2 exam every 3 years.
- ☐ Minimum of 2 years work experience in fire sprinklers/standpipes.

#### Suppression Installer Limited

- ☐ Satisfactory completion of the ASD2 exam every 3 years.
- ☐ Minimum of two years' work experience in single-family multipurpose fire sprinkler systems.
- ☐ State of Colorado Plumber license

#### Service Technician - B

- ☐ Satisfactory completion of the FEX and CKH2 OR KHFE2 exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate)

#### Service Technician – C

- ☐ Satisfactory completion of the FEX exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate).

#### Service Technician - D

- ☐ Satisfactory completion of the FEX exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate).

#### Fire Hydrant Technician

- ☐ Satisfactory completion of the CTFH2 exam every 3 years.
- ☐ Minimum 2 years' experience.

#### Fire Alarm On-Site Installer

- ☐ Current and valid NICET Level II or higher certificate OR satisfactory completion of FA2 exam every 3 years
- ☐ Documentation of minimum 2 years' experience.



# PIKES PEAK REGIONAL BUILDING DEPARTMENT

## Fire Alarm Contractor License Application

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the state license in compliance with the Pikes Peak Regional Building Code.

RBD USE ONLY

Date 9-7-2018  
Initial SE  
Receipt # 153496  
RBD #

FIRE ALARM CONTRACTOR LICENSE REQUESTED (Check one)

☒ FAC-A ☐ FAC-B

### Business Information

Type of Entity (Check one) ☐ Individual ☐ Partnership ☐ Corporation ☒ LLC

Business Name: Harbinger Fire And Security LLC

(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate.)

Federal Employer Identification Number: \_\_\_\_\_

Business Address: 15630 E. Hinsdale Dr.

Street Address

Apartment/Unit #

Centennial

CO

80016

City

State

ZIP Code

Business Phone: 720 437 8210

Business Email: Rob@harbingerfs.com

Business Fax: \_\_\_\_\_

Business Website: \_\_\_\_\_

Company's Principal Officers, Partners, or Owners

Name: George Horn

Title: President/Owner

Name: Jerad Madeo

Title: Owner

1. Number of years company has operated as a contractor? (If new, write "new") 3

2. Type of work performed? (Check one or both, if applicable) ☐ Residential ☒ Commercial

3. Has the company ever been named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against them in which the company was the contractor? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

4. Has the company been a defendant in a collection action court case? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

5. Has the company ever declared bankruptcy? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

6. Has the company ever had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

7. Has the company ever defaulted on a contract? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

### Licenses held by the Company

Jurisdiction - License type and number

Jurisdiction- License type and number

<u>Boulder #</u>	
<u>Westminister</u>	



# Licensee Information

Legal Name: Goins John E.  
Last First M.I.

Date of Birth: 11-10-60 Social Security Number: [REDACTED]

Address: 8 May St.  
Street Address Apartment/Unit #  
Colorado Springs CO 80906  
City State ZIP Code

Phone: 719 499 1095 Fax: \_\_\_\_\_ Email: john@harbingerfs.com

- What is your area of expertise in the industry? Low voltage Contracting & fire alarm system design/installation
- How long have you worked in the industry? 13 years
- What is your affiliation with the company? (Owner, partner, employee, etc.) \_\_\_\_\_
- Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
- Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
- The examinee understands that direct supervision and control includes any one or a combination of the following activities: supervising, managing construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites. Will you, as the qualifying individual, perform one or more of these duties? ☐ Yes ☐ No

## Certifications

NICET #	NICET Level	Expires
<u>109372</u>	<u>3</u>	<u>9/1/18</u>
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

## Work History

Company	Position	To	From
<u>Fire alarm drafting design and install</u>	<u>10+ years</u>		

**CERTIFICATION** (The following declaration is to be signed by the Licensee) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (Licensee): John E. Goins III

Signature of (Licensee): [Signature] Date: 7/27/18

# Responsible Managing Employee (RME) Information

Legal Name: Goins John E  
Last First M.I.

Date of Birth: 11-10-66 Social Security Number: [REDACTED]

Address: 8 May st C/S CO. 80906  
Street Address City State ZIP Code

Phone: 719 499-6956 Fax: \_\_\_\_\_ Email: John at firework.com

- What is your area of expertise in the industry? Low voltage Contracting & fire alarm system design/installation.
- How long have you worked in the industry? 13 years
- What is your affiliation with the company? (Owner, partner, employee, etc.) Fire Alarm Manager
- Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
- Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

6. I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. ☒ Yes ☐ No

## Certifications

NICET #	NICET Level	Expires
<u>109372</u>	<u>3</u>	<u>9/1/18</u>
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

## Work History

Company	Position	To	From
<u>Fire alarm system design and</u>	<u>install</u>	<u>10+ years.</u>	

**CERTIFICATION** (The following declaration is to be signed by the RME) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (RME): John Goins III

Signature of (RME): [Signature] Date: 7-27-18



411 of these jobs are apartment complexes with the exception of JBI Costco.

Job details: Installing FA/BDA/etc up to current codes.

**Projects Completed in Past 5 Years**

Please attach separate sheet if necessary

Project Cornerstar

Date 9/1/17

Contract Value \$202,400.00

Contractor Garrett & Companies

Contact Jacob Weichman

Phone 812 350 7470

Project North Range Crossing

Date 10/1/17

Contract Value \$425,000.00

Contractor Palace Construction

Contact Erek Swanson

Phone 303 698 4125

Project 13th & Delaware

Date 10/1/17

Contract Value \$652,400.00

Contractor CFC Construction - RMK Electric

Contact Jerad Madeo

Phone 303 471 5675

Project 2935 Lanmer St.

Date 10/1/17

Contract Value \$24,000.00

Contractor Symmetry Builders - LLP Development

Contact Steve Kurtz

Phone 303 797 9119

Project 2080 18th St.

Date 11/1/17

Contract Value \$243,000.00

Contractor Shaw Construction

Contact Jerad Madeo

Phone 303 471 5675

Project 35130 Pedestrian Bridge

Date 11/1/18

Contract Value \$14,000.00





**Projects Completed in Past 5 Years**

Please attach separate sheet if necessary

Project Willow Street Residences  
Date 11/1/17 Contract Value \$167,900.00  
Contractor Taylor Kohrs - 2 Oak Partners  
Contact Pete Gimmel Phone 303 588 3974

Project Balfour Senior Housing  
Date 2/1/17 Contract Value \$153,100  
Contractor Bradbury Stamm  
Contact Thomas Thompson Phone 505 362 3860

Project Alexan Lo-Hi  
Date 2/1/17 Contract Value \$307,900.00  
Contractor Trammel Crow Residential - RMK Electric  
Contact Jerad Madero Phone 303 471 5675

Project Amazon Gaylor  
Date 5/1/17 Contract Value € \$389,300.00  
Contractor Gaylor Electric  
Contact Brad Foster Phone 705 404 4619

Project 1616 Broadway  
Date 10/1/17 Contract Value \$106,900.00  
Contractor Bradbury Stamm  
Contact Brian Brown Phone 303 681 10907

Project Alexan 20th St. Station  
Date 7/1/17 Contract Value \$537,200.00



**Projects Completed in Past 5 Years**

Please attach separate sheet if necessary

Project Terraza Del Sol

Date 5/1/2010

Contract Value \$120,500.00

Contractor RMK Electric

Contact Jerad Madero

Phone 303 471 5675

Project The Jux

Date 10/1/2010

Contract Value \$112,000.00

Contractor RMK Electric

Contact Jerad Madero

Phone 303 471 5675

Project Decatur St. 10 Plex

Date 6/1/2010

Contract Value \$36,000.00

Contractor Canyon Creek Construction

Contact Kevin Romero

Phone 303 435 7201

Project 35th & Larimer

Date 10/1/2010

Contract Value \$143,300.00

Contractor Drahota Construction

Contact Robert King

Phone 970 204 0100

Project ~~1011110~~ 28th & Valley

Date 10/1/10

Contract Value \$742,000.00

Contractor Mitender White

Contact Alex Stein


Phone 720 415 5423

Project JB1 Costco

Date 9/1/10

Contract Value \$10,400.00

**Colorado**  
**Driver License**



**Expires: 11-10-2020**  
**Issued: 11-06-2015**  
**DOB: 11-10-1988**  
**Class: R**  
**End:**  
**Rest: C**  
**Previous Type: A**  
**Ht: 6'00" Wt: 280**  
**Eyes: GRN Sex: M**

*[Signature]*

**JOHN EARL GOINS II**  
**B MAY ST**  
**COLO SPRGS, CO 80906**

For company records





**NATIONAL INSTITUTE FOR CERTIFICATION  
IN ENGINEERING TECHNOLOGIES®**

*Providing Certification Programs Since 1961*

**BE IT KNOWN THAT**

**John E. Goins, II**

**IS HEREBY AWARDED CERTIFICATION AT**

**LEVEL III**

**IN FIRE PROTECTION ENGINEERING TECHNOLOGY  
FIRE ALARM SYSTEMS**

**BASED UPON SUCCESSFUL DEMONSTRATION OF REQUISITE KNOWLEDGE,  
EXPERIENCE AND WORK PERFORMANCE AS SET FORTH BY THIS INSTITUTE.**

*Certification Valid through September 1, 2018*

**CERTIFICATION NUMBER 109372**

**CHAIRMAN OF THE NICET BOARD OF GOVERNORS**

**A DIVISION OF THE NATIONAL SOCIETY OF PROFESSIONAL ENGINEERS**

Sent from my iPhone

\*Has applied & been approved for NICET4

Cert # 109372



This license is in effect for the calendar year only or until the new code test are released. It will expire at that time. The new test procedures will be posted on the DFD web site.



TESTED/ISSUED 5-10-18



17 August 2018

TO: Pikes Peak Regional Building Department

ATTN: Fire Alarm Contractor License Application

To Whom It May Concern,

Our company, Harbinger Fire & Security LLC, is applying for a Fire Alarm Contractor License Application with the Licensee being John E. Goins II. We are writing to inform you that he is currently a full time employee for our company working as our Fire Alarm Manager and will continue to be a full time employee for the foreseeable future. Please accept this letter as acceptance and acknowledgement that he is exclusively a full time employee for Harbinger Fire and Security LLC.

Sincerely,

A handwritten signature in blue ink, appearing to read "G. Horn", with a stylized flourish at the end.

George Horn

*President*

Feel free to contact me for any further questions using the information below:

E-Mail: [George@HarbingerFS.com](mailto:George@HarbingerFS.com)

Phone: 720-626-1934





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/17/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Moody Insurance Agency, Inc. 8055 East Tufts Avenue Suite 1000 Denver CO 80237	CONTACT NAME: Tiffany Sponenberg, AINS PHONE (A/C No. Ext): (303) 824-6600 FAX (A/C No.): (303) 378-0118 E-MAIL ADDRESS: tiffany.sponenberg@moodyins.com
INSURED Harbinger Fire and Security LLC 15630 E Hinsdale Dr Centennial CO 80112	INSURER(S) AFFORDING COVERAGE INSURER A: Selective INSURER B: Pinnacol Assurance 41190 INSURER C: INSURER D: INSURER E: INSURER F:

## COVERAGES

CERTIFICATE NUMBER: 18-19 Harbinger

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR NSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CG7988 01-16 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		S2302759	1/1/2018	1/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		S2302759	1/1/2018	1/1/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Underinsured motorist \$ Included
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		S2302759	1/1/2018	1/1/2019	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Leased/Rented Equipment	Y/N <input type="checkbox"/> N/A	4206825	1/1/2018	1/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
			S2302759	1/1/2018	1/1/2019	Limit 90,000 Ded 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

## CERTIFICATE HOLDER

## CANCELLATION

Pikes Peak Regional Building Department  
2880 International Cir  
Colorado Springs, CO 80910

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

T Sponenberg, AINS/DO

ACORD 25 (2014/01)

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INS025 (201401)

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# PIKES PEAK REGIONAL BUILDING DEPARTMENT

2880 International Circle  
Colorado Springs, Colorado 80910  
Website: <http://www.pprbd.org>

9/7/2018 1:52:18 PM  
(SABRINA)  
Receipt #: 1534956

## Invoice

Customer: HARBINGER FIRE AND SECURITY, L

### Transaction Summary

Account	Description	Reference	Amount
1301-40036	CONTRACTOR FEES APPLICATION	APP FEE	\$50.00

Total Due: \$50.00

### Payment Summary

Account	Description	Reference	Amount
9801-55200	COLLECTION, CHECK	3320	\$50.00

Total Tendered: \$50.00

Comment: JOHN GOINS



**NATIONAL INSTITUTE FOR CERTIFICATION  
IN ENGINEERING TECHNOLOGIES®**

*Providing Certification Programs Since 1961*

**BE IT KNOWN THAT**

**John E. Goins, II**

**IS HEREBY AWARDED CERTIFICATION AT**

**LEVEL IV**

**IN FIRE PROTECTION ENGINEERING TECHNOLOGY  
FIRE ALARM SYSTEMS**

**BASED UPON SUCCESSFUL DEMONSTRATION OF REQUISITE KNOWLEDGE,  
EXPERIENCE AND WORK PERFORMANCE AS SET FORTH BY THIS INSTITUTE.**

Certification Valid through September 1, 2021

CERTIFICATION NUMBER 109372

CHAIRMAN OF THE NICET BOARD OF GOVERNORS

A DIVISION OF THE NATIONAL SOCIETY OF PROFESSIONAL ENGINEERS





## FIRE APPLICATION CONTRACTOR AND INSTALLER CHECK LIST

COMPANY NAME: Fire Protection Concepts Inc

PRINCIPAL: N/A

LICENSE HOLDER: Mark Neal

RME: Mark Neal

RECOMMEND:

☒ APPROVAL

☐ DISAPPROVAL

DATE ~~8.16.18~~ 9/28/18

LICENSE APPLYING FOR:

FSC-A

**FSC-B**

FSC-C

FSC-D

FSC-H

FSC-M

FAC-A

FAC-B

FAI

FSI

FSI-L

FST-B

FST-C

FST-D

FHT

PPRBD INFORMATION	NAME	DATE
RECEIVED BY PPRBD	Rose	8.16.18
CRIMINAL BACKGROUND CHECK	Rose	8.16.18
SENT TO FIRE	Rose	8.16.18

DEPARTMENT	NAME	DATE
<b>CSFD</b>	<b>Chip Taylor</b>	<b>9/2/18</b>

COMMENTS:

Reinstatement

PPRBD LICENSING

Phone: 719-327-2887

Fax: 719-327-2626

Email: [Licensing@pprbd.org](mailto:Licensing@pprbd.org)

FIRE

Phone: 719-385-5982

Fax: 719-385-7330

Email: [Fireconstructionservices@springsgov.com](mailto:Fireconstructionservices@springsgov.com)



#### **Fire Suppression Contractor – A**

- ☐ RME w/ Current NICET Level III or IV certificate in sprinkler layout/design or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Suppression Contractor – B**

- ☒ Letter of commitment stating minimum equipment requirements are met for portable/fixed systems.
- ☒ D.O.T registration as approved cylinder requalification facility OR contract with an outside cylinder requalification facility (a copy of this contracted facility's certification of liability insurance equal to that of the licensee's shall be provided).
- ☒ Documentation showing the RME qualifications and at least 3 years applicable work experience
- ☒ Certification from at least one manufacturer of special hazard systems that the applicant markets.
- ☒ Certificate of Liability and Workers' Compensation insurance.

#### **Fire Suppression Contractor/Dealer – C**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable fire extinguishers.
- ☐ D.O.T registration as approved cylinder requalification facility OR contract with an outside cylinder requalification facility (a copy of this contracted facility's certification of liability insurance equal to that of the licensee's shall be provided).
- ☐ Documentation showing the RME qualifications and at least 2 years applicable work experience
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Commercial, Industrial, or Institutional Non-Contractor/Dealer – D**

- ☐ Letter of commitment stating minimum equipment requirements are met for portable fire extinguishers.
- ☐ Documentation showing the RME qualifications and at least 2 years applicable work experience
- ☐ Certificate of Liability and Workers' Compensation insurance.

#### **Fire Suppression Contractor – M**

- ☐ RME w/ Current and Valid Colorado State Master Plumber's license w/ minimum 3 years' experience.
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Suppression Contractor – H**

- ☐ Letter of commitment stating minimum equipment requirements are met for servicing and maintaining hydrants.
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation showing the Responsible Managing Employee (RME) qualifications for service and repair of fire hydrants.

#### **Fire Alarm Contractors – A**

- ☐ RME w/ Current NICET Level III or IV certificate in Fire Alarm Systems or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### **Fire Alarm Contractors – B**

- ☐ RME w/ Current NICET Level II or higher in Fire Alarm Systems or a Colorado Registered PE
- ☐ Certificate of Liability and Workers' Compensation insurance.
- ☐ Documentation of minimum 5 years work experience.

#### Suppression Installer

- ☐ Satisfactory completion of the ASCR2 exam every 3 years.
- ☐ Minimum of 2 years work experience in fire sprinklers/standpipes.

#### Suppression Installer Limited

- ☐ Satisfactory completion of the ASD2 exam every 3 years.
- ☐ Minimum of two years' work experience in single-family multipurpose fire sprinkler systems.
- ☐ State of Colorado Plumber license

#### Service Technician - B

- ☐ Satisfactory completion of the FEX and CKH2 OR KHFE2 exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate)

#### Service Technician – C

- ☐ Satisfactory completion of the FEX exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate).

#### Service Technician - D

- ☐ Satisfactory completion of the FEX exam every 3 years.
- ☐ Minimum 2 years' experience OR factory training (include copy of certificate).

#### Fire Hydrant Technician

- ☐ Satisfactory completion of the CTFH2 exam every 3 years.
- ☐ Minimum 2 years' experience.

#### Fire Alarm On-Site Installer

- ☐ Current and valid NICET Level II or higher certificate OR satisfactory completion of FA2 exam every 3 years
- ☐ Documentation of minimum 2 years' experience.

## PIKES PEAK REGIONAL BUILDING DEPARTMENT

### Fire Suppression Contractor License Application

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the state license in compliance with the Pikes Peak Regional Building Code.

#### RBD USE ONLY

Date 8-16-18

Initial RS

Receipt # 1527758

RBD # 20539

#### FIRE SUPPRESSION CONTRACTOR LICENSE REQUESTED (Check one)

☐ FSC-A ☒ FSC-B ☐ FSC-C ☐ FSC-D ☐ FSC-H ☐ FSC-M

#### Business Information

Type of Entity (Check one) ☐ Individual ☐ Partnership ☒ Corporation ☐ LLC

Business Name: FIRE PROTECTION CONCEPTS INC.

(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate.)

Federal Employer Identification Number: 26-3506662

Business Address: 501 Violet ST

Street Address

Apartment/Unit #

GOLDEN

CO

80401

City

State

ZIP Code

Business Phone: 303-679-1679

Business Email: MARK@FIRE PROTECTION CONCEPTS.COM

Business Fax: 303-680-670-3352

Business Website: WWW.FIRE PROTECTION CONCEPTS.COM

Company's Principal Officers, Partners, or Owners

Name: MARK NEAL

Title: PRESIDENT

Name: JACQUELINE NEAL

Title: V.P.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

1. Number of years the company has operated as a contractor? (If new, write "new") 10

2. What is the company's area of specialties? SPECIAL HAZARD FIRE PROTECTION

Type of work performed? (Check one or both, if applicable)

☐ Residential ☒ Commercial

3. Has the company ever been named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against them in which the company was the contractor? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

4. Has the company been a defendant in a collection action court case? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

5. Has the company ever declared bankruptcy? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

6. Has the company ever had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

7. Has the company ever defaulted on a contract? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_

Project History (List projects in which this company worked as the contractor.)

1. Project Street Address: H.P. COLORADO SPRINGS

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 400,000.00 Date: 2009/2010 Your position: PRESIDENT - PROJECT MANAGER

Describe Job in detail: INSTALLATION OF LARGE SCALE VESPA SYSTEM.

2. Project Street Address: PAULING PROPERTIES 1350 BELLVIEW

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 20,000.00 Date: 2013 Your position: PRESIDENT - PROJECT MANAGER

Describe Job in detail: CLEAN AGENT FIRE SUPPRESSION SYSTEM INSTALLATION

3. Project Street Address: UNITED STATES AIR FORCE ACADEMY

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 40,000.00 Date: 2011 Your position: PRESIDENT PROJECT MANAGER

Describe Job in detail: INSTALLATION OF NOVEL 1230 CLEAN AGENT SYSTEM.

4. Project Street Address: UNITED FLIGHT ALLIANCE 7630 CHESTER ST. CENTENNIAL CO. 80112

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 160,000.00 Date: 7/2018 Your position: PRESIDENT PROJECT MANAGER

Describe Job in detail: INSTALLATION OF NEW CLEAN AGENT SYSTEM.

5. Project Street Address: FMobile Aurora CO, 18400 EAST 22ND AVE AURORA CO. 80111

Type of work (check one) ☐ Residential ☐ Commercial

Cost: 450,000.00 Date: 2015 Your position: PRESIDENT - PROJECT MANAGER

Describe Job in detail: INSTALLATION OF NEW FIRE ALARM and CLEAN AGENT SYSTEM.

**CERTIFICATION** (The following declaration is to be signed by the principal officer of the company) The undersigned, on behalf of the company, partnership or corporation, does hereby declare and warrant that the "examinee" for a contractor's license named herein has the express authority to bind the company, partnership, or corporation by this application; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the City of Colorado Springs, El Paso County, and those adopted by the municipal entities within El Paso County in regard to any work which may be performed by our company pursuant to the contractor license for which this application is made.

Print Name and title (owner, principal or manager) MARK Neal - President

Signature: [Signature] Date: 8/14/2018

# Responsible Managing Employee (RME) Information

Legal Name: NEAL MARK A.  
Last First M.I.

Date of Birth: 7-1-64 Social Security Number: [REDACTED]

Address: 9223. Booker Lane  
Street Address Apartment/Unit #

Conifer CO 80401  
City State ZIP Code

Phone: 720-317-7072 Fax:  Email: MARK@Fire PROTECTION CONCEPTS.COM

1. What is your area of expertise in the industry? Clean Agent Systems / Fire Alarm
2. How long have you worked in the industry? 31 years (plus 4 years military Fire Protection experience)
3. What is your affiliation with the company? (Owner, partner, employee, etc.) OWNER - President
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain

6. I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. ☒ Yes ☐ No

## Certifications

NICET #	NICET Level	Expires
<u>122473</u>	<u>4</u>	<u>5-1-2020</u>
P.E. #	Issued	Expires
<u></u>	<u></u>	<u></u>
D.O.T. #	Issued	Expires
<u></u>	<u></u>	<u></u>

## Work History

Company	Position	To	From
<u>See Attached Letter</u>	<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>	<u></u>

**CERTIFICATION** (The following declaration is to be signed by the RME) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (RME): MARK A. Neal President

Signature of (RME): [Signature] Date: 8/14/2018

### Licensee Information

Legal Name: NEAL MARK A  
Last First M.I.

Date of Birth: 7-1-64 Social Security Number: [REDACTED]

Address: 9223 Booker LAN  
Street Address Apartment/Unit #

CONIFER CO 80401  
City State ZIP Code

Phone: 720-317-7072 Fax: \_\_\_\_\_ Email: MARK@FIRE PROTECTION CONCEPTS.COM

1. What is your area of expertise in the industry? Clean Agent Systems / FIRE Alarm
2. How long have you worked in the industry? 31 years / plus 4 years military FIRE suppression EXPERIENCE
3. What is your affiliation with the company? (Owner, partner, employee, etc.) PRESIDENT - OWNER
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain \_\_\_\_\_
6. The examinee understands that direct supervision and control includes any one or a combination of the following activities: supervising, managing construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites. Will you, as the qualifying individual, perform one or more of these duties? ☐ Yes ☐ No

### Certifications

NICET #	NICET Level	Expires
<u>122473</u>	<u>4</u>	<u>5-1-2020</u>
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

### Work History

Company	Position	To	From
<u>See attached letter</u>			

**CERTIFICATION** (The following declaration is to be signed by the Licensee) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (Licensee): MARK NEAL President

Signature of (Licensee): [Signature] Date: 8-1-2018

Fire Protection Concepts  
416A Violet Street  
Golden State, Colorado  
ATTN: Mark Neal




**A-GAS AMERICAS  
GREEN LETTER  
OF RECLAMATION, RECOVERY, AND DESTRUCTION**

This certificate is to acknowledge that Fire Protection Concepts has in the past and will continue in the future to send their Ozone-Depleting Substances to a DOT certified reclamation facility. A-Gas Americas provides clean agent refilling and recharging to Fire Protection Concept, and is an environmentally friendly company, which has every intention on causing zero harm to the environment from the products that are processed at this facility.

The reclamation process at A-Gas Americas meets all requirements of the 1992 Clean Air Act for the reprocessing of Ozone-Depleting Chemicals. The material has been or will be reclaimed or destroyed by A-Gas Americas to the highest accepted industry standards using only top of the line equipment, which allows virtually no emissions to be released in to the atmosphere.

Please keep this letter as a receipt for your disposition of the transferred material. Some state and local authorities require detailed record keeping of transfers and/or disposals of Ozone-Depleting Substances.

By   
Terri AuFrance  
Director of Fire Protection  
A-Gas Americas

Date 5/10/2017





# NATIONAL INSTITUTE FOR CERTIFICATION IN ENGINEERING TECHNOLOGIES®

*Providing Certification Programs Since 1961*

BE IT KNOWN THAT

**Mark A. Neal**

IS HEREBY AWARDED CERTIFICATION AT

LEVEL IV

IN FIRE PROTECTION ENGINEERING TECHNOLOGY  
SPECIAL HAZARDS SUPPRESSION SYSTEMS

**BASED UPON SUCCESSFUL DEMONSTRATION OF REQUISITE KNOWLEDGE,  
EXPERIENCE AND WORK PERFORMANCE AS SET FORTH BY THIS INSTITUTE.**


Certification Valid through May 1, 2020

CERTIFICATION NUMBER 122473

CHAIRMAN OF THE NICET BOARD OF GOVERNORS

A DIVISION OF THE NATIONAL SOCIETY OF PROFESSIONAL ENGINEERS


**Colorado** ★  
**Driver License**



**Expires:** 07-01-2020  
**Issued:** 06-30-2015  
**DOB:** 07-01-1964  
**Class:** R  
**End:**  
**Rest:** C  
**Previous Type:** A  
**Ht:** 5'11" **Wt:** 220 **Eyes:** BRO **Sex:** M

**MARK ALLEN NEAL**  
**9223 BOOKER LANE**  
**CONIFER, CO 80433**

*Mark Allen Neal*



## **Qualifications**

**January 1983 to January 1987**

- USN HT/DC rank of E5
- Responsible for the maintenance and service of the following systems
- 13 engineered high pressure Halon 1301 systems
- 2 Kidde high pressure CO2 systems
- 4 AFFF fixed Low Cap Foam Systems
- 2 High speed Deluge Systems
- 2 Ansul Dry Chemical Systems
- Naval Fire Fighter training (four schools from 1983 to 1987)

## **Duties**

- Training of all personnel in the application and use of all marine fire suppression systems. And shipboard fire fighting procedures.
- Attained designation of COMDESRON 23 Fire Marshall 1985 to 1987.
- Aircraft flight deck fire protection team leader

**January 1987 to January 1990**

**San Diego Fire Equipment Company**

## **Duties**

- Installation and service technician
- Managed branch office in Anaheim California designing, installing and service Special hazard engineered fire suppression systems as follows

Kidde Halon 1301 engineered suppression systems  
Chemetron Halon 1301 and High pressure CO2 systems  
Pyrotronics Pyrolon engineered halon 1301 systems  
Chemetron IFD air sampling systems  
Chemetron low pressure CO2 systems  
Factory certified by both Kidde and Chemetron Corporations

**January 1991 to January 1994**

**California Suppression Systems Long Beach California**

## **Duties**

- Project manager responsible for the design and installation of various types of special hazard fire detection and suppression systems.
- Promoted to Director of Operations in 1991. Responsibilities included management of system startup and certifications including door fan pressurization testing and system programming.

- During the period of 1990 thru 1994 I was directly responsible for the installation of Over 1500 engineered fire suppression systems while employed by CSSI. These systems include, FM 200, CO2, Vesda, AnaLaser, FCI detection and control systems. Additionally we maintained and provided new fixed fire suppression and detection systems for over 500 GTE sites throughout the state of California.

## **February 1994 to February 1996**

### **E&M Systems Englewood Colorado**

#### **Duties**

- General Manager E&M systems Englewood Colorado
- Managed all operations including all engineering, sales and installation of all special hazard fire suppression systems offered by E&M Systems Inc.

#### **System Type**

- Fenwal Engineered Fire Suppression Systems
- FCI Fire Detection and control Systems
- Chemetron Fire Suppression Systems
- Vesda Air Sampling Systems
- Detronics Optical Flame Sensing Systems

## **March 1996 to September 2008**

### **Westfire Inc. Arvada Colorado**

#### **Duties**

- Profit Center Manager with the responsibility of training consulting engineers, local fire Authorities and end users on the design and application of engineered fire detection and Suppression systems. Duties include commissioning and door fan room integrity testing.
- Engineering of Fike, Fenwal, Ansul, Siemens and FCI fire detection and clean agent fire Suppression systems.
- Sales of all engineered systems within Profit center 400. Including FM 200, CO2 Novec 1230, Sapphire, FCI, Fire sentry Flame detection and Liquid Leak Detection Systems
- Directly responsible for the design, installation and certification of over 600 engineered Fire detection and suppression systems from 1996 to 2008.

## **September 2008 to Present**

### **Fire Protection Concepts Inc. Golden Colorado**

#### **Duties**

- President and owner of Fire Protection concepts Inc.
- Day to day operations including accounting business responsibility of training consulting engineers, local fire authorities and end users on the design and application of engineered fire detection and suppression systems. Duties include commissioning and door fan room integrity testing.
- Engineering of ANSUL Siemens, MINIMAX and KIDDE engineered systems.
- Sales of all engineered systems including FM 200, CO2, Novec 1230, Sapphire, FCI, Fire sentry Flame detection and Liquid Leak Detection Systems
- Directly responsible for the design, installation and certification of over 300 engineered Fire detection and suppression systems from 2008 to present.

#### **Training and Certifications**

- Fike Pro Inert Engineered Systems Design and Application
- Cal State Long Beach Management Certificate Program 1991
- NFPA 72 Fire Alarm Certificate program 1992 La Jolla California 1992
- USN Fixed Fire suppression certifications 1983 to 1987
- Fire Marshall COMDESRON 23 United States Navy
- Pyro Chem FM 200 design and installation Certificate October 2008
- Pyro Chem Detection and Control training October 2008
- Red Rocks Community College Low Voltage Electrical Certification EIC -105-001
- Ansul Engineered CO2 Systems training certification
- Fike Engineered Detection/ Control Systems May 2007
- Fike Detection/ Vesda Certification May 2007
- Fire suppression System Association Certificate of Completion February 2008
- Ansul Sapphire Engineered Clean Agent Systems Certification October 2007
- Installer/ Inspector Certification from the City and County of Denver May 2006
- Safe IFD Detection System Certification 2001
- MINIMAX FM 200 and NOVEC 1230 Systems
- VESDA Certification
- City of Denver Electrical Signal License # 240125

***Providing Mission Critical Uptime Solutions***





## **Fire Protection Concepts, Inc.**

Office 303-679-1679  
Fax 303-670-3352  
Cell 720-317-7072  
501 Violet Street  
Golden, Colorado 80401

**August**

**Pikes Peak Regional Building Department  
2880 International Circle  
Colorado Springs, Colorado. 80910**

**Re: Application For Fire Suppression B Contractors License**

**To Whom It may Concern,**

**Fire Protection Concepts Inc. was incorporated in October 2008 in the State of Colorado EIN number 26-3506662.**

**Fire Protection Concepts Inc. specializes in the consulting, design, installation and service of engineered fire detection and special hazards fire Suppression systems. We are an authorized distributor for Siemens, MINIMAX, Kidde and Ansul.**

**I personally have 35 years' experience in the special hazards fire protection industry. Certifications include certification from United States Navy various manufactures, the FSSA and NFPA and NICET certificate program and membership.**

**I have attached a brief history of my experience and valid certification documents for your review.**

**Thank you for review and consideration of my application.**

**Cordially,**

***Mark A. Neal***

**Mark A. Neal**

**President**

**Fire Protection Concepts Inc.**



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/27/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  
Trust Hall Insurance Services Inc.  
7502 W 80th Ave. Suite 180

CONTACT NAME: Debbie Dermont

PHONE (A/C No. Ext.): (303) 421-2802

FAX (A/C No.): (303) 421-2886

E-MAIL ADDRESS: deb@trusthall.com

Arvada CO 80003

INSURED  
Fire Protection Concepts, Inc.  
501 Violet St.

Golden CO 80401

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Everest Indemnity Insurance Co

INSURER B: Pinnacle Assurance

41190

INSURER C:

INSURER D:

INSURER E:

INSURER F:

## COVERAGES

CERTIFICATE NUMBER: 2017 to 2018

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

PER LTR	TYPE OF INSURANCE	ADD. SUBR. INSD. WVD.	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		516L006477-171	11/5/2017	11/5/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPAGP AGG \$ 2,000,000 E & O Coverage - Included \$ COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		516L006477-171	11/5/2017	11/5/2018	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED. <input type="checkbox"/> RETENTION \$		51CC003036-171	11/5/2017	11/5/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y N/A	4100582	2/1/2018	2/1/2019	PER. STATUTE <input type="checkbox"/> OTH. <input type="checkbox"/> EL EACH ACCIDENT \$ 1,000,000 EL DISEASE - EA EMPLOYEE \$ 1,000,000 EL DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Coverage is subject to the forms and conditions of the policy.

## CERTIFICATE HOLDER

Pikes Peak Regional Building Department  
2880 International Circle  
Colorado Spring, CO 80910

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Scot Humrich/DEBBIE

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ACORD 25 (2014/01)  
INS025 (201401)

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WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY  
INFORMATION PAGE

☐ Renewal ☐ Reissue  
EVEREST NATIONAL INSURANCE COMPANY (A stock company)

☒ New Policy No. 5300004296181  
☐ Rewrite Prior Policy No: NEW  
Account No:

NCCI Carrier Code: 28312

477 Martinsville Road

Liberty Corner, NJ 07938-0830

Telephone Number: 800-438-4375

N.J. Taxpayer Identification No:

1. The Insured: FIRE PROTECTION CONCEPTS INC

Branch Code: 022

Producer: ALL RISKS, LTD.

Mailing address: 501 VIOLET STREET  
GOLDEN, CO 80401

Address: 10150 YORK ROAD  
5TH FLOOR  
HUNT VALLEY, MD 21030

Sub-producer:

Address:

☐ Individual ☐ Partnership ☒ Corporation ☐ Joint Venture ☐ Other

FEIN: SEE EXTENSION OF INFORMATION PAGE - NAMED INSURED, IDENTIFICATION NUMBERS AND OTHER WORKPLACES SCHEDULE.

Other Workplaces not shown above: SEE EXTENSION OF INFORMATION PAGE - NAMED INSURED, IDENTIFICATION NUMBERS AND OTHER WORKPLACES SCHEDULE.

2. The policy period is from 03-06-2018 to 11-05-2018 effective 12:01 a.m. Standard  
Time at the insured's mailing address. ☐ This is a three-year fixed policy

Anniversary Rate Date:

3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of  
the states or territories listed here:  
CO

B. Employers Liability Insurance: Part Two of the policy applies to work in each state or territory listed in item 3.A.  
The limits of our liability under Part Two are:

Bodily Injury by Accident	\$	<u>1,000,000</u>	each accident
Bodily Injury by Disease	\$	<u>1,000,000</u>	policy limit
Bodily Injury by Disease	\$	<u>1,000,000</u>	each employee

C. Other States Insurance: Part Three of the policy applies to the states or territories, if any, listed here:  
All states EXCEPT those listed in item 3.A. of the Information Page and the following states or territories:  
ND OH PR VI WA WY

D. This policy includes these endorsements and schedules:

SEE EXTENSION OF INFORMATION PAGE - SCHEDULE OF FORMS AND ENDORSEMENTS.

4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans.  
All information required below is subject to verification and change by audit.

SEE EXTENSION OF INFORMATION PAGE - CLASSIFICATION SCHEDULE/PREMIUM ELEMENTS.

Minimum Premium	\$	550	Total Estimated Annual Premium	\$	2,191
Expense Constant	\$	200			
			Total Estimated Charge	\$	2,191

If indicated below, Interim adjustments of  
premium shall be made:

☐ Semi-annually ☐ Quarterly ☐ Monthly

Deposit Premium \$

Countersigned by

Date

Includes copyrighted material of National Council on Compensation Insurance, Inc. used with its permission © 1988, 1991 NCCI

INSURED COPY

OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF FACT OF GOOD STANDING**

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Fire Protection Concepts, Inc.

is a

Corporation

formed or registered on 10/08/2008 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20081537856 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/13/2018 that have been posted, and by documents delivered to this office electronically through 08/14/2018 @ 11:13:34 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/14/2018 @ 11:13:34 in accordance with applicable law. This certificate is assigned Confirmation Number 11061825 .



A handwritten signature in blue ink that reads "Wayne W. Williams".

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*  
*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/his/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."*



THIS IS TO CERTIFY THAT  
MARK ALLEN NEAL

IS A LICENSED (ID# 10962)  
Fire Suppression B Technician

Expires: 30-Apr-2019

(gave card to Mark Neal 4-17-18) J





THE CITY OF ASPEN

**Contractor License**  
License Number : F-040023



ISSUED DATE: 05/09/2017

EXPIRATION DATE: 5/1/2020

Contractor Type: Alarm Installation

FIRE PROTECTION CONCEPTS, INC  
DBA: FIRE PROTECTION CONCEPTS, INC  
416 A VIOLET ST  
GOLDEN, CO 80401

  
\_\_\_\_\_  
Chief Building Official, Aspen

  
\_\_\_\_\_  
Chief Building Official, Pitkin Co.



Public Works  
Building Division  
15151 E. Alameda Pky  
Aurora, CO 80012  
303-739-7420

1308700

## CONTRACTOR LICENSE

Date of Issue: 08/06/2018

Date of Expiration: 09/01/2019

License Number: 2018 1501470 00 CL

Contractor Name: FIRE PROTECTION CONCEPTS INC

Type of License: Fire Sprinkler Systems Contractor

Permits Online User

LICENSING OFFICIAL

It is the licensee's responsibility to be familiar with the City of Aurora Building Codes Division **Chapter 22 Building and Building Regulations, Article III Contractors Division 22-61 through 22-102** for contractor and supervisor licensee responsibilities.

FIRE PROTECTION CONCEPTS INC  
501 VIOLET ST  
GOLDEN CO 80401

Cut along perforated line

Wallet

Duplicate



Public Works Building Division  
15151 E. Alameda Parkway  
AURORA, CO 80012  
PHONE NO. (303) 739-7420

Valid through: 09/01/2019

Contractor: FIRE PROTECTION CONCEPTS INC

Type of License: Fire Sprinkler Systems Contractor

License #: 2018 1501470 00 CL

A signed license by license official should be maintained in your files.



Public Works Building Division  
15151 E. Alameda Parkway  
AURORA, CO 80012  
PHONE NO. (303) 739-7420

Valid through: 09/01/2019

Contractor: FIRE PROTECTION CONCEPTS INC

Type of License: Fire Sprinkler Systems Contractor

License #: 2018 1501470 00 CL

A signed license by license official should be maintained in your files.



Public Works  
Building Division  
15151 E. Alameda Pky  
Aurora, CO 80012  
303-739-7420

1308703

## CONTRACTOR LICENSE

Date of Issue: 08/06/2018

Date of Expiration: 09/01/2019

License Number: 2018 1501476 00 CL

Contractor Name: FIRE PROTECTION CONCEPTS INC

Type of License: Fire Alarm Systems Contractor

Permits Online User

LICENSING OFFICIAL

It is the licensee's responsibility to be familiar with the City of Aurora Building Codes Division **Chapter 22 Building and Building Regulations, Article III Contractors Division 22-61 through 22-102** for contractor and supervisor licensee responsibilities.

FIRE PROTECTION CONCEPTS INC  
501 VIOLET ST  
GOLDEN CO 80401

Cut along perforated line

Wallet

Duplicate



Public Works Building Division  
15151 E. Alameda Parkway  
AURORA, CO 80012  
PHONE NO. (303) 739-7420

Valid through: 09/01/2019

Contractor: FIRE PROTECTION CONCEPTS INC

Type of License: Fire Alarm Systems Contractor

License #: 2018 1501476 00 CL

A signed license by license official should be  
maintained in your files.



Public Works Building Division  
15151 E. Alameda Parkway  
AURORA, CO 80012  
PHONE NO. (303) 739-7420

Valid through: 09/01/2019

Contractor: FIRE PROTECTION CONCEPTS INC

Type of License: Fire Alarm Systems Contractor

License #: 2018 1501476 00 CL

A signed license by license official should be  
maintained in your files.



**CITY OF BOULDER**  
**Planning and Development Services**

1739 Broadway, Third Floor • P.O. Box 791, Boulder, CO 80306-0791  
phone 303-441-1880 • fax 303-441-4241 • web [boulderplandevlop.net](http://boulderplandevlop.net)

**FIRE PROTECTION CONCEPTS, INC**  
501 VIOLET ST  
GOLDEN, CO 80401

February 28, 2018

**CONTRACTOR LICENSES**

This document certifies that FIRE PROTECTION CONCEPTS, INC currently holds the following contractor license(s) :

<u>License #</u>	<u>License Type</u>	<u>Expiration Date</u>
LIC-0008699-04	Fire Class C Fire Alarm Systems	12/15/2018
LIC-0008699-05	Fire Class D Special Hazard Systems	02/28/2019

**Associated Certifications :**

<u>Name/Company</u>	<u>License Type</u>	<u>License No.</u>	<u>Expiration Date</u>
None	None	None	None

**Tested Individuals :**

<u>Name</u>	<u>License Type</u>	<u>Title of Tester</u>	<u>Code Tested or Reciprocity</u>
Bill Gashler	Fire Class C Fire Alarm Systems	Applicant	

FIRE PROTECTION CONCEPTS INC  
501 VIOLET ST  
GOLDEN, CO 80401



City of Centennial

Contractor License

License Number: CEN-19-11516

License Type: B - Trade Contractor License

Contact: NEAL, MARK

Issue Date: 05/31/2018

Expiration Date: 05/30/2019

Business Address:

FIRE PROTECTION CONCEPTS INC  
501 VIOLET ST  
GOLDEN, CO 80401

13133 Arapahoe Road • Centennial, Colorado 80112 • P: 303.754.3321 • F: 303.708.1790



STATE OF COLORADO  
Division of Fire Prevention and Control



18-S-01475

*Be It Known That*  
**Fire Protection Concepts Inc.**

**Mark Neal-RME**

*Has Successfully Completed All Requirements  
to Become Registered*

**Fire Suppression Systems Contractor**

*Issued On*

**March 13, 2018**

*Expiring On, Unless Earlier Revoked*

**December 31, 2018**

*In Accordance With*

**8 CCR 1507-11**

Fire & Life Safety Section  
Division of Fire Prevention & Control  
700 Kipling Street, Suite 4100  
Denver, CO 80215

**Mike Morgan, Director**



City and County of Denver  
Community Planning and Development  
[www.denvergov.org/contractor\\_licensing](http://www.denvergov.org/contractor_licensing)

License/Registration Number: LIC240126  
Expiration Date: 03/31/2021  
License Type: Fire Pro C

Issued To:

By Authority of the Executive Director of  
Community Planning and Development

FIRE PROTECTION CONCEPTS INC  
501 VIOLET ST  
GOLDEN, CO 80401

Amount	Fund/Org/Revenue Code	Payment Date	Trans #	Status
\$250.00	R353900-01010-0141200	03/27/2018	4201898	Paid

#### RENEWAL INFORMATION

Renewal notices will be e-mailed to e-mail address on  
file  
Renewal information is available at [www.denvergov.org/Contractor\\_Licensing](http://www.denvergov.org/Contractor_Licensing).

#### INSPECTION INFORMATION

Inspection requests called in by 12:00 a.m. will usually be  
scheduled for the following working day.  
Please provide the following information when  
you call for an inspection:  
✓ Permit number  
✓ Type of inspection and inspection code  
Automated Inspection Request System: 720-865-2501  
Inspections are performed Monday through Friday.

City and County of Denver  
Community Planning and Development  
[www.denvergov.org/contractor\\_licensing](http://www.denvergov.org/contractor_licensing)

License/Registration Number: LIC240125  
Expiration Date: 03/31/2021  
License Type: Electrical Signal

Issued To:

By Authority of the Executive Director of  
Community Planning and Development

FIRE PROTECTION CONCEPTS INC  
501 VIOLET ST  
GOLDEN, CO 80401

Amount	Fund/Org/Revenue Code	Payment Date	Trans #	Status
\$250.00	R352900*-01010-0141200	03/27/2018	4201698	Paid

#### RENEWAL INFORMATION

Renewal notices will be e-mailed to e-mail address on file.  
Renewal information is available at [www.denvergov.org/Contractor\\_Licensing](http://www.denvergov.org/Contractor_Licensing).

#### INSPECTION INFORMATION

Inspection requests called in by 12:00 a.m. will usually be scheduled for the following working day.

Please provide the following information when you call for an inspection:

- ✓ Permit number
- ✓ Type of inspection and inspection code

Automated Inspection Request System: 720-866-2501

Inspections are performed Monday through Friday.



# CONTRACTOR LICENSE / REGISTRATION

*City of Englewood, Colorado*

DIVISION OF BUILDING AND SAFETY

**License Type: E04 SPECIAL**

**License No: 18059**

**Issue Date: 4/11/2018**

**Expires: 5/15/2019**

**Issued To:**

**FIRE PROTECTION CONCEPTS INC  
501 Violet St.**

**Licensing Agent:**

*City of Englewood, Colorado*

**GOLDEN, CO 80401**

Fire Protection Concepts Inc  
Jacqueline Neal  
416 A Violet St.  
Golden, CO 80401



# City of Golden

## CONTRACTOR REGISTRATION

Registration #: 4188

Fire Protection Concepts Inc  
Jacqueline Neal  
416 A Violet St.  
Golden, CO 80401

Registration: Exp Date:  
Fire Protectio **2/16/2019**

### City of Golden

#### CONTRACTOR REGISTRATION

Fire Protection Concepts Inc  
Jacqueline Neal  
416 A Violet St.  
Golden, CO 80401

Registr: Exp Date:  
Fire Protec **2/16/2019**

For information, please contact the Building Division at 303-384-8151



**CITY OF SHERIDAN**  
Contractor License

Type of License  
**FIRE ALARM SYSTEMS**

Issued  
**07/02/2018**

Expires  
**06/30/2019**

Contractor Number  
**180079**

**FIRE PROTECTION CONCEPTS INC**  
**501 VIOLET ST**  
**GOLDEN CO 80401**



**THIS LICENSE IS NOT TRANSFERABLE**

**CITY OF SHERIDAN**  
Contractor License

Type of License  
**FIRE ALARM SYSTEMS**

Issued  
**07/02/2018**

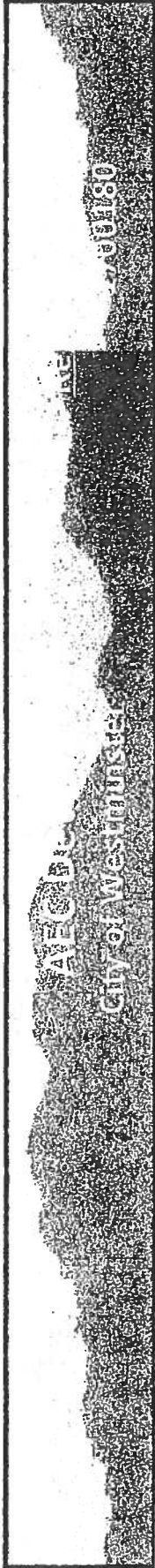
Expires  
**06/30/2019**

Contractor Number  
**180079**

**FIRE PROTECTION CONCEPTS INC**  
**501 VIOLET ST**  
**GOLDEN CO 80401**



**THIS LICENSE IS NOT TRANSFERABLE**



**Company:** Fire Protection Concepts Inc  
**Address:** 501 Violet Street  
**Type:** GENERAL CONTRACTOR  
**Website:**  
**Business Agency:**

**City, State ZipCode:** Golden, CO 80401  
**Subtype:**  
**Email:** mark@fireprotectionconcepts.com  
**Business No.:**

**Phone 1:** (303)679-1679  
**Phone 2:**  
**Phone 3:**  
**Fax:** (303)670-3352  
**Bus Lic Issued:**  
**Bus Lic Expires:**

**Status:** ACTIVE  
**Issued:** 7/9/2018  
**Expires:** 7/31/2019  
**Trust Account No.:**

**Notes:**

INSURANCE					
NAMETYPE	CARRIER	CARRIER PHONE	POLICY NO	POLICY ISSUE	POLICY EXPIRE

CONTACTS					
NAMETYPE	NAME	ADDRESS1	CITY	STATE	ZIP
OWNER	Mark Neal	9223 Booker Lane	Conifer	CO	80433
					(303)679-1679
					FAX
					EMAIL
					mark@fireprotectionconcepts.com

CHRONOLOGY ACTIONS			
ACTION TYPE	ACTION BY	ACTION DATE	COMPLETED DATE

FINANCIAL INFORMATION				
DESCRIPTION	QUANTITY	PAID DATE	AMOUNT	PAY METHOD
CONTRACTOR REGISTRATION FEE	0	7/9/2018	110	CHECK
CONTRACTOR REGISTRATION FEE	0	1/30/2017	110	CREDIT

TRUST ACCOUNT				
TRANSDATE	USERID	DESCRIPTION	AMOUNT	PAY BY
				DATE POSTED
				RECEIPT NO
				PAY METHOD
				CHECK NO
				COMMENTS



## CITY OF WHEAT RIDGE

Building Division  
7500 W 29TH AVE

WHEAT RIDGE CO 80033-8001 (303)235-2855

### Contractor's License # - 170062

Fire Protection Concepts Inc  
Mark/Jacqueline Neal  
501 VIOLET ST  
GOLDEN CO 80401

Bus Phone: (303)679-1679  
Fax: (303)670-3352

Type of License	Expires On	Amount
Fire Protection Contractor	03/31/19	75.00
Person(s) able to pull permits: Mark Neal, Mark Landin		

*Randy Musser*

Chief Building Official

03/14/18

This is to Certify that

**Fire Protection Concepts Inc.**

is registered with the Wyoming Department of Fire  
Prevention and Electrical Safety  
and is hereby permitted to work as a

**Low Volt Contractor Alarms**

Issue Date: 7/25/2018  
Expires: 7/1/2019

License # LV-A-47117  
Issued by: Bridget Carson

This is to Certify that

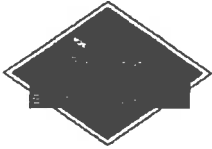
**Fire Protection Concepts Inc.**

is registered with the Wyoming Department of Fire  
Prevention and Electrical Safety  
and is hereby permitted to work as a

**Low Volt Contractor Alarms**

Issue Date: 7/25/2018  
Expires: 7/1/2019

License # LV-A-47117  
Issued by: Bridget Carson



**PIKES PEAK REGIONAL BUILDING DEPARTMENT**

2880 International Circle  
Colorado Springs, Colorado 80910  
Website: <http://www.pprbd.org>

8/16/2018 9:33:56 AM  
(ROSE)  
Receipt #: 1527758

**Invoice**

Contractor: FIRE PROTECTION CONCEPTS, INC. (20539)

**Transaction Summary**

Account	Description	Reference	Amount
1301-40036	CONTRACTOR FEES APPLICATION	App Fee	\$50.00
1301-40112	CONVENIENCE FEE WESTERN UNION SPEEDPAY (TELEPHONE)	FEE	\$3.50

Total Due: \$53.50

**Payment Summary**

Account	Description	Reference	Amount
9801-55700	COLLECTION, VISA/Master-Card	635459	\$53.50

Total Tendered: \$53.50

Comment:

I agree to pay above total amount according to card issuer agreement.





A-Gas  
1100 Harding Road  
Bowling Green, Ohio 43402  
USA

T (+1) 419-567-8990  
E info@aggas.com

Fire Protection Concepts  
416A Violet Street  
Golden State, Colorado  
ATTN: Mark Neal

### A-GAS GREEN LETTER OF RECLAMATION, RECOVERY, AND DESTRUCTION

This certificate is to acknowledge the successful transfer of an Ozone-Depleting Substance to a responsible reclamation facility. A-Gas is an environmentally friendly company, which has every intention on causing zero harm on the environment from the product that is processed at this facility.

The reclamation process at A-Gas meets all requirements of the 1992 Clean Air Act for the reprocessing of Ozone-Depleting Chemicals. The material has been or will be reclaimed or destroyed by A-Gas to the highest accepted industry standards using only top of the line equipment, which allows de minimis emissions to be released in to the atmosphere.

Please keep this letter as a receipt for your disposition of the transferred material. Some state and local authorities require detailed record keeping of transfers and/ or disposals of Ozone-Depleting Substances.

By Doug Hentges Date 9/18/18  
Doug Hentges  
Fire Protection  
A-Gas Together We Can

A-Gas is a trading subsidiary of A-Gas US Holdings Inc.



Client#: 1513657

AGASUS

ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/20/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> USI Insurance Services, LLC CL One SeaGate, Suite 1800 Toledo, OH 43604 419 243-1191		<b>CONTACT NAME:</b> Mary Leck <b>PHONE (A/C, No, Ext):</b> 419 243-1191 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> Mary.Leck@usi.com															
<b>INSURED</b> Reclamation Technologies 1100 Haskins Road Bowling Gree, OH 43402		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Continental Casualty Company</td> <td>20443</td> </tr> <tr> <td>INSURER B : Continental Insurance Company</td> <td>35289</td> </tr> <tr> <td>INSURER C : Argonaut Insurance Company</td> <td>19801</td> </tr> <tr> <td>INSURER D : Texas Mutual Insurance Company</td> <td>22945</td> </tr> <tr> <td>INSURER E : American Casualty Company of Reading PA</td> <td>20427</td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Continental Casualty Company	20443	INSURER B : Continental Insurance Company	35289	INSURER C : Argonaut Insurance Company	19801	INSURER D : Texas Mutual Insurance Company	22945	INSURER E : American Casualty Company of Reading PA	20427	INSURER F :	
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INSURER F :																	

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			6057121608	05/31/2018	05/31/2019	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
E	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			6057121592	05/31/2018	05/31/2019	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10000			6057121611	05/31/2018	05/31/2019	EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	928308353464	09/24/2017	09/24/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E L EACH ACCIDENT \$1,000,000 E L DISEASE - EA EMPLOYEE \$1,000,000 E L DISEASE - POLICY LIMIT \$1,000,000
D	Texas Work Comp			0001243506	09/24/2017	09/24/2018	Ea Acc \$1,000,000 Ea Emp \$1,000,000 Policy \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

If required by written contract, the certificate holder is an additional insured.

## CERTIFICATE HOLDER

## CANCELLATION

Fire Protection Concepts, Inc.  
 416A Violet Street  
 Golden State, CO 80401-0000

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



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# Certificate of Training



*This certifies that*

**Mark Neal**

*of*

Fire Protection Concepts Inc

*has successfully completed 32 contact hours of training for*

**Engineered Fire Suppression Systems**

FM-200    Novac 1230 Fluid    HPCO2    Alarm and Detection

*Incorporating the Janus Design Suite*

**Thursday, March 30, 2017**

Date Issued

**Tuesday, December 31, 2019**

Date of Expiration

Issued By

A handwritten signature in blue ink, appearing to read "Mark Neal", written over a horizontal line.

*Janus Fire Systems  
1102 Ruprecht Dr  
Addition Park  
Crown Point, IN, USA 46037*

Certification Number: **345-2**





# *Certificate of Training*

**MX-1230 & MX-200 SYSTEMS**

This is to certify that  
**MARK NEAL**  
(Fire Protection Concepts Inc.)

.....

Successfully completed the above training session on Design, Installation & Maintenance for Minimax USA MX-1230 & MX-200 Fire Suppression Systems.

Completed February 28, 2017

*Doug Meyers*

.....  
Minimax

Valid Thru: 2/2020





# *Certificate of Training*

**MX-2002 & MX-320 Panels**

This is to certify that

**MARK NEAL**  
**(FIRE PROTECTION CONCEPTS INC.)**

.....

Successfully completed the above training session on Installation & Maintenance for  
Minimax MX-2002 Agent Release Panel & MX-320 Fire Alarm Controls.

Completed March 2, 2017

Valid Thru 03/2020

.....  
*Deborah C. Meyers*  
Minimax Trainer

ACORD™

Client#: 1513657

AGASUS

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/20/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> USI Insurance Services, LLC CL One SeaGate, Suite 1800 Toledo, OH 43604 419 243-1191		<b>CONTACT NAME:</b> Mary Leck <b>PHONE (A/C, No, Ext):</b> 419 243-1191 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> Mary.Leck@usi.com															
<b>INSURED</b> Reclamation Technologies 1100 Haskins Road Bowling Gree, OH 43402		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Continental Casualty Company</td> <td>20443</td> </tr> <tr> <td>INSURER B : Continental Insurance Company</td> <td>35289</td> </tr> <tr> <td>INSURER C : Argonaut Insurance Company</td> <td>19801</td> </tr> <tr> <td>INSURER D : Texas Mutual Insurance Company</td> <td>22945</td> </tr> <tr> <td>INSURER E : American Casualty Company of Reading PA</td> <td>20427</td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Continental Casualty Company	20443	INSURER B : Continental Insurance Company	35289	INSURER C : Argonaut Insurance Company	19801	INSURER D : Texas Mutual Insurance Company	22945	INSURER E : American Casualty Company of Reading PA	20427	INSURER F :	
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## COVERAGES

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AUTHORIZED REPRESENTATIVE



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A-Gas  
1100 Hoskins Road  
Bowling Green, Ohio 43402  
USA

T / +1 419-867-8990  
E info.oh@ugas.com

Fire Protection Concepts  
416A Violet Street  
Golden State, Colorado  
ATTN: Mark Neal

### A-GAS GREEN LETTER OF RECLAMATION, RECOVERY, AND DESTRUCTION

This certificate is to acknowledge the successful transfer of an Ozone-Depleting Substance to a responsible reclamation facility. A-Gas is an environmentally friendly company, which has every intention on causing zero harm on the environment from the product that is processed at this facility.

The reclamation process at A-Gas meets all requirements of the 1992 Clean Air Act for the reprocessing of Ozone-Depleting Chemicals. The material has been or will be reclaimed or destroyed by A-Gas to the highest accepted industry standards using only top of the line equipment, which allows de minimis emissions to be released in to the atmosphere.

This letter is also to certify that Reclamation Technologies Inc formally dba A-Gas, is responsible for recertifying any system bottles to DOT specifications. Any system bottle that is sent to our facility for recharge is inspected and certified per guidelines set forth by DOT. If you have any questions about our services, please feel free to contact us.

**DOT RIN# 040417 550 006YA**

Please keep this letter as a receipt for your disposition of the transferred material. Some state and local authorities require detailed record keeping of transfers and/ or disposals of Ozone-Depleting Substances.

By Doug Hentges Date 9/27/18  
Doug Hentges  
Fire Protection  
A-Gas Together We Can



A Gas is a trading subsidiary of A Gas US Holdings Inc.

[www.agasamericas.com](http://www.agasamericas.com)